PTO/SB/21 (09-04)

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		Application Number	er	10/626,4	12	$\boldsymbol{\lambda}$	
FORM MAY 1 8 2006		Filing Date		07/24/20	07/24/2003		
		First Named Inventor Daniel B. Gibbs			Gibbs	7	
MAT I O. TOOD		Art Unit		3635		٦	
(to be used so all correspondence after initial filing)		Examiner Name		Jeanette E. Chapman		٦	
Total Number of Pages in This Submiss	Attorney Docket N	umber	7629				
	ENCLO	SURES (check all tha	nt apply)				
Fee Transmittal Form	Drawing(s				llowance Communication to TC		
Fee Attached	Licensing	related Papers		Appeal Communication to Board			
—	Petition			of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final		Convert to a al Application		Proprietary Information			
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Extension of Time Request (included in Amendment A)	Terminal (Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request	Request for	or Refund per of CD(s)		Return Pos	stcard		
Information Disclosure Statement	I —	ndscape Table on CD					
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Reply to Missing Parts/ Incomplete Application							
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SIGI	NATURE OF A	APPLICANT, ATTO	RNEY, O	R AGENT	- •	٦	
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Signature	Mich						
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Date		Reg. No.	30,662				
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I hereby certify that this corresponden Service with sufficient postage as first P.O. Box 1450, Alexandria, VA 22313-	class mail in ar	n envelope addressed					
Signature	il.	m-					
Typed or printed name Leslie S	Miller			Date	May 15, 2006		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. MW/1313475

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Effective on 12/08 ees pursuant to the Consolidated Approp	8/2004. priations Act. 2005 (H.R. 4818)	Complete if Known				
		Application Number	10/626,412			
🍍 FEE TRANS	MITTAL	Filing Date	07/24/2003			
for FY 2	2005	First Named Inventor	Daniel B. Gibbs			
Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Jeanette E. Chapman			
		Art Unit	3635			
TOTAL AMOUNT OF PAYMENT	(\$) 60.00	Attorney Docket No.	7629			

MAY 1 8 2006

METHOD OF PAYMENT (check all that apply)								
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :								
☐ Deposit Account Deposit Account Number: 18-0882 Deposit Account Name: Reinhart Boerner Van Deuren s.c.								
For the above-id	entified depo	sit account, the D	irector is hereby	authorized to: (ch	eck all that ap	pply)		
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		fee(s) or underpa		Credit a	ny overpayme	ents; charge any	discrepancy	
Under 37 WARNING: Information on the	CFR 1.16 ar	d 1.17, except for	or the issue fee	on should not be in	cluded on this	form. Provide cre	edit card	
information and authorizatio								
FEE CALCULATION						0		
1. BASIC FILING, SEA					EV 4 5 4 1 1	ATION 5550		
	FILING F	EES Small Entity	SEARCH	Small Entity		ATION FEES Small Entity		
Application Type	Fee (\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	ES						Small Entity	
Fee Description Fach claim over 20 (inc	rluding Reis	cuec)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)					200	100		
Multiple dependent claims					360	180		
Total Claims						Multiple Dependent Claims		
-20 or HP:		X	_ = _	-		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$)								
- 3 or HP=	•	X <u>r ce</u>	= 100	<u>, τ αια (ψ)</u>				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Sheets or traction thereof. See 35 U.S.C. 41(a)(1)(d) and 37 CFR 1.10(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
4. OTHER FEE(S)							Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): One Month Extension of Time fee (\$60.00) \$60.00						50.00		
								

SUBMITTED BY			_		
Signature	frem f. Mr	Registration No. (Attorney/Agent)	30,662	Telephone	414-298-8321
Name (Print/Type)	(Print/Type) Leslie S. Miller			Date May 15, 2006	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.